

May 19th 2017

Chairman Ajit Pai
Commissioner Mignon Clyburn
Commissioner Michael O'Rielly
Federal Communications Commission
445 12th Street, SW
Washington, DC 20554

RE: Actions to Accelerate Adoption and Accessibility of Broadband-Enabled Health Care Solutions and Advanced Technologies, GN Docket No 16-46

Dear Chairman Pai and Commissioners Clyburn and O'Reilly,

iSelectMD was formed in 2011 and provides real-time healthcare access to subscribers to treat non-urgent illnesses and when appropriate prescribe "non-narcotic" medication to resolve illnesses. iSelectMD created "The Center for the Advancement of mHealth" in 2016 to educate and inform wireless broadband end users of alternative healthcare delivery methods. These innovative methods improve access to health care and reduce costs in rural areas through "virtual" visits very similar to Physician Office and Urgent Care Centers.

Mobile Health also referred to as mHealth or Telehealth is a next generation and innovative delivery method to real time Healthcare enabled by wireless devices. There are two key components to mHealth – the first of which is the range of savings with an economic value that delivers savings at a ratio of every \$1 spent equals \$4 -\$10 saved. The second is enhancing the quality of life that insures that everyone with a wireless device and their dependents have access to healthcare in real time. The ancillary benefits can be the most beneficial in education and awareness and diagnosing catastrophic illnesses before they become catastrophic.

Comments and Suggestions to the Connect2Health Task Force

The current mHealth program that supports connectivity between "Healthcare Providers" should be modified to allow improved access between the "Broadband Subscriber" and the "Healthcare Provider".

The objective is to improve access to primary care in rural areas utilizing broadband technology and connectivity to Board Certified Physicians through their wireless / wireline / broadband service provider. Providing Voice and Video access through broadband connectivity to eliminate high cost "In Person Visits" when deemed unnecessary by the Healthcare Provider. This can be best delivered through educating and informing the subscribers that have a direct "line of communication" to and from their broadband provider.

The primary comment and suggestion – Based on new technology and innovation is to modify current regulations and guidelines - to direct FCC mHealth funding support to eligible "Healthcare Providers" and "Broadband Subscribers" that would provide the following:

- Drastically improve access to healthcare in underserved areas
- Eliminate burdensome travel in areas in which no healthcare access is available prime example: http://www.healthleadersmedia.com/community-rural/35-texas-counties-have-zero-physicians
- Reduced unnecessary patient overloads in Emergency Rooms that are inundated with nonemergency healthcare issues
- Allow technology and innovation to thrive through proactively delivering healthcare access direct to broadband subscribers

I would like to close this letter by providing my professional and personal opinion on the current state of healthcare in the US. The US; according to 2015 publications is ranked 43rd in the world in life expectancy. Significantly below colder climate countries which would indicate harsher environments that would impact longevity of life. https://www.infoplease.com/world/health-and-social-statistics/life-expectancy-countries-0 In addition, the US spends \$590 billion a year on US defense while wasting \$750 billion on healthcare - https://www.medicalrecoveryservices.org/resources/six-wasteful-practices-united-states-healthcare-spending/ the net result is \$3000 "wasted" annually for every US resident.

The author of these suggestions and comments believes that the FCC, through mHealth funding could play a pivotal role in one of the most debated and challenging issues of our time. While providing mHealth funding for broadband in the proper and more stressed areas; the FCC could have a significant impact on the following:

- Access for US Military Veterans
- Reduced cost for low income families
- Eliminate strain on the current national healthcare physician deficit
- Indirectly, however tangibly assist with healthcare reform challenges

Year after year our country faces the same redundant challenges due to a lack of creative thinking. In order to solve healthcare access and cost problems, leadership and stakeholders must look at problem solving in an aggressive and different manner.

We certainly appreciate the Connect2Health Task Force's desire to promote change. Reaching out to the "troops on the ground" for suggestions and comments is an exemplary step in the right direction. I hope these comments and suggestions pique the interest of leadership and assists the Task Force and FCC leadership to find and achieve new ways to enhance the quality of life that we all strive for.

My best regards,

Michael P. laquinta iSelectMD and the Center for the Advancement of mHealth